

Fill in this Information to identify the case:

Debtor 1 **Springfield Furniture Inc.**
First Name _____ Middle Name _____ Last Name _____

Debtor 2
(Spouse, if filing) First Name _____ Middle Name _____ Last Name _____

United States Bankruptcy Court for the: EASTERN District of VIRGINIA
(State)
Case number: **85-10349-RGM**

FILED
MAILROOM
2021 JUN 21 PM 2:53
CLERK
U.S. BANKRUPTCY COURT
ALEXANDRIA DIVISION

Form 1340 (12/19)

APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

1. Claim Information

For the benefit of the Claimant(s)¹ named below, application is made for the payment of unclaimed funds on deposit with the court. I have no knowledge that any other party may be entitled to these funds, and I am not aware of any dispute regarding these funds.

Note: If there are joint Claimants, complete the fields below for both Claimants.

Amount:	\$1,614.00
Claimant's Name:	Benjamin D. Tarver dba Bankruptcy Settlement Group
Claimant's Current Mailing Address, Telephone Number, and Email Address:	2885 Sanford Ave SW #37848, Grandville, MI 49418 Phone 832-781-0620 help@claimtransfers.com

2. Applicant Information

Applicant² represents that Claimant is entitled to receive the unclaimed funds because (*check the statements that apply*):

- Applicant is the Claimant and is the Owner of Record³ entitled to the unclaimed funds appearing on the records of the court.
- Applicant is the Claimant and is entitled to the unclaimed funds by assignment, purchase, merger, acquisition, succession or by other means.
- Applicant is Claimant's representative (e.g., attorney or unclaimed funds locator).
- Applicant is a representative of the deceased Claimant's estate.

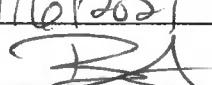
3. Supporting Documentation

- Applicant has read the court's instructions for filing an Application for Unclaimed Funds and is providing the required supporting documentation with this application.

¹ The Claimant is the party entitled to the unclaimed funds.

² The Applicant is the party filing the application. The Applicant and Claimant may be the same.

³ The Owner of Record is the original payee.

<p>Applicant Declaration Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.</p> <p>Date: <u>6/16/2021</u> </p> <p>Signature of Applicant Benjamin D. Tarver</p> <p>Printed Name of Applicant</p> <p>Address: 2885 Sanford Ave SW #37848 Grandville, MI 49418</p> <p>Telephone: 832-781-0620</p> <p>Email: help@claimtransfers.com</p> <p>6. Notarization STATE OF ARIZONA COUNTY OF COCHISE</p> <p>This Application for Unclaimed Funds, dated <u>6/16/21</u> was subscribed and sworn to before me this <u>16</u> day of <u>JUNE</u>, 20<u>21</u> by Benjamin D. Tarver</p> <p>who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to within the instrument. WITNESS my hand and official seal.</p> <p>(SEAL) Notary Public <u>M. Mietzner ND</u></p> <p>My commission expires: <u>11/12/21</u></p>	<p>Co-Applicant Declaration (if applicable) Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.</p> <p>Date: _____</p> <p>Signature of Co-Applicant (if applicable)</p> <p>Printed Name of Co-Applicant (if applicable)</p> <p>Address: _____</p> <p>Telephone: _____</p> <p>Email: _____</p> <p>6. Notarization STATE OF _____ COUNTY OF _____</p> <p>This Application for Unclaimed Funds, dated _____ was subscribed and sworn to before me this _____ day of _____, 20 _____ by</p> <p>who signed above and is personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to within the instrument. WITNESS my hand and official seal.</p> <p>(SEAL) Notary Public _____</p> <p>My commission expires: _____</p>
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MICHELLE G MIETZNER
Notary Public, State of Arizona
Pima County
My Commission Expires
November 12, 2021

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

IN RE:

CASE NO. 85-10349-RGM
CHAPTER 7

Springfield Furniture, Inc.
Debtors(s)

CERTIFICATE OF SERVICE

I hereby certify that on this 10th day of JUNE, 2021, a copy of the foregoing Application for Payment of Unclaimed Funds was served on the following addresses by first class mail:

U.S. Attorney
World Trade Center
101 W. Main Street, Suite 8000
Norfolk, VA 23510

U.S. Trustee
115 S. Union Street, Suite 210
Alexandria, VA 22314

Dated: 6/16/21



Benjamin D. Tarver dba Bankruptcy
Settlement Group
2885 Sanford Ave SW #37848
Grandville, MI 49418
(832) 781-0620

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

IN RE:

CASE NO. 85-10349-RGM
CHAPTER 7

Springfield Furniture, Inc.

Debtors(s)

ORDER GRANTING APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

On _____, an application was filed for the Claimant(s), Benjamin D. Tarver dba Bankruptcy Settlement Group, for payment of unclaimed funds deposited with the court, pursuant to 11 U.S.C. § 347(a). The application and supporting documentation establish that the Claimant(s) is/are entitled to the unclaimed funds; accordingly, it is hereby

ORDERED that, pursuant to 28 U.S.C. § 2042, the sum of **\$1614.00** held in unclaimed funds be made payable to Benjamin D. Tarver dba Bankruptcy Settlement Group and be disbursed to the payee at the following address: 2885 Sanford Ave SW #37848, Grandville, MI 49418.

Enter:

Dated: _____

United States Bankruptcy Judge

Dated: 6/16/2021

Respectfully Submitted: _____



Benjamin D. Tarver dba Bankruptcy
Settlement Group
2885 Sanford Ave SW #37848
Grandville, MI 49418
(832) 781-0620

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

IN RE:

CASE NO. 85-10349-RGM

Springfield Furniture, Inc.

Debtor(s)

/

AFFIDAVIT OF APPLICANT

I, Benjamin D. Tarver, do hereby certify that I am doing business as Bankruptcy Settlement Group ("BSG"), and that BSG is legally entitled to the unclaimed funds referenced in this application and that no other party is entitled to these funds.

In support, applicant respectfully represents as follows:

1. A check for "Edward Cannon" in the amount of \$1614.00 was not negotiated and was thus remitted as unclaimed funds to the Clerk of the Court.
2. Edward Cannon assigned the unclaimed funds referenced in the application to BSG.

I declare under penalty of perjury that the foregoing is true and correct.

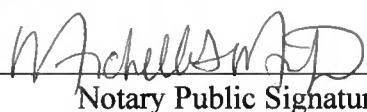
Dated: 6/16/21



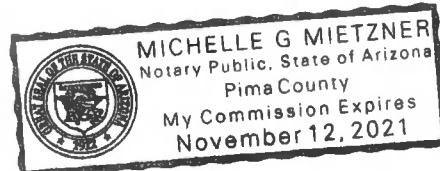
Benjamin D. Tarver
2885 Sanford Ave SW #37848
Grandville, MI 49418

Sworn to and subscribed before me,
State of ARIZONA, County of COCHISE

This 10th day of JUNE, 2021


Notary Public Signature

My Commission Expires: 11/12/21



UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA

IN RE:

CASE NO. 85-10349

Springfield Furniture, Inc.

AFFIDAVIT AND ASSIGNMENT

Edward Cannon Debtor(s)

I, Edward Cannon, of 120 LAKE MERYL DR, APT 219, WEST PALM BEACH, FL 33411-3368, certify:

1. That I am at least 18 years of age.
2. For good and for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I hereby certify that I have unconditionally and irrevocably sold, transferred and assigned to Bankruptcy Settlement Group ("Assignee"), its successors and assigns, whose mailing address is 2885 Sanford Ave SW #37848, Grandville, MI 49418, all right, title and interest in and to my claims in the above referenced bankruptcy proceeding, including without limitation my right to receive any future payments, distributions, unclaimed dividends and/or other property in the bankruptcy proceeding. I waive any notice or hearing requirements imposed by Court rules and stipulate that an order may be entered recognizing this Assignment as an unconditional Assignment and Assignee herein as the valid owner of my claim(s) and/or rights.
3. I am a debtor or creditor in the above referenced bankruptcy proceeding.
4. My address was/is 1425 4th St., SW, Washington, DC 20024.

I certify under penalty of perjury that the foregoing is true and correct.

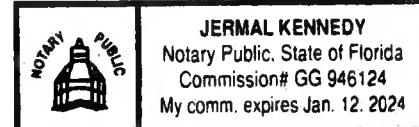
Dated: May 14, 2021

Edward Cannon

SIGN ONLY IN THE PRESENCE OF A NOTARY PUBLIC AND AFFIX NOTARY SEAL

Sworn to and subscribed before me,
State of Florida, County of Palm Beach
This 14 day of May, 2021

Jermal Kennedy
Notary Public Signature



My Commission Expires: JAN 12, 2024

(NOTARY SEAL)

Return this form to: Bankruptcy Settlement Group, 2885 Sanford Ave SW #37848, Grandville MI 49418

State of Arizona

Department of State

TRADE NAME CERTIFICATION



Bankruptcy Settlement Group

I, Katie Hobbs, Arizona Secretary of State, do hereby certify that in accordance with the Trade Name Application filed in this Office, the Trade Name herein certified has been duly registered pursuant to Section 44-1460, Arizona Revised Statutes, on behalf of:

Benjamin Deray Tarver

289 S Highway 92 14207 Sierra Vista, AZ 85635

Registration Date: May 7, 2021

Expiration Date: May 7, 2026

Date First Used: October 15, 2020

Filing Number: 9220852

Application Date: May 7, 2021



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Arizona. Done at the Capitol in Phoenix, on this day, May 07, 2021.

A handwritten signature of Katie Hobbs.

Katie Hobbs
Secretary of State

Verification URL: go.azsos.gov/qd8t

UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
ALEXANDRIA DIVISION

In re: Springfield Furniture, Inc.

Case No. 85-10349-RGM
Chapter 7

Debtor(s)

CERTIFICATION UNDER LOCAL BANKRUPTCY RULE 2090-1

Document Title: APPLICATION FOR PAYMENT OF UNCLAIMED FUNDS

Date Document Filed:

Docket Entry No.

I declare under penalty of perjury that (Check one box):

XXXX No attorney has prepared or assisted in the preparation of this document.



Benjamin D. Tarver dba
Bankruptcy Settlement Group

Executed on: 6/16/2021 (Date)

[2090edva ver. 09/17]